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CONFIRMATION NO. 7554

<b>SERIAL NUMBER</b> 09/941,825	<b>FILING OR 371(c) DATE</b> 08/29/2001 <b>RULE</b>	<b>CLASS</b> 433	<b>GROUP ART UNIT</b> 3732	<b>ATTORNEY DOCKET NO.</b> D-SHO-301
<b>APPLICANTS</b> Itzhak Shoher, Tel Aviv, ISRAEL; Ahqron Whiteman, Petach Tikvah, ISRAEL;				
** CONTINUING DATA ***** NONE				
** FOREIGN APPLICATIONS ***** NONE				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED.. SMALL ENTITY ** ** 09/29/2001.				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>Tim Lieberstein</i> Allowance Acknowledged <i>Text</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> ISRAEL	<b>SHEETS DRAWING</b> 17	<b>TOTAL CLAIMS</b> 16
<b>ADDRESS</b> Eugene Lieberstein 2151 Long Ridge Road Stamford, CT 06903		<b>INDEPENDENT CLAIMS</b> 2		
<b>TITLE</b> Adaptation device and method for molding a dental material				
<b>FILING FEE RECEIVED</b> 355	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

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